Substitute for form 1449/PTO				Complete if Known		
				Application Number	10/685,586	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				Filing Date	October 16, 2003	
				First Named Inventor	Daben Liu	
				Art Unit	2626	
(Use as many sheets as necessary)				Examiner Name	D. Siedler	
Sheet	1	of	1	Attorney Docket Number	BBNT-P01-086	

	U.S. PATENT DOCUMENTS						
Examiner Initials*			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
		US-6,119,163	09-2000	Monteiro et al.			

	FOREIGN PATENT DOCUMENTS							
Examiner Initials*	Cite No.1	Foreign Patent Document  Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>6</sup> (# known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T°		

\*EXAMINE: Indial if reference considered, whether or not clation is in conformance with MEPE 600. Down live involvabilities for inconformance and not considered, include copy of the form with next communication to applicant. \*CITE No. Those applications) which are marked with an single esteristic (\*) next to the CIN No are not supplied (under 37 CFR 1.58(a)2(iii)) because that application was filled after June 30, 2003 or is available in the IFW. \*Applicant's unique cliation designation numeric (principant). \*See Notice Costs of USPFO Tearth Cooperation See Visit (\*) and the second section of the IFW. \*Applicant's complete in the IFW. \*Applicant's complete in the IFW. \*Applicant i

	NON PATENT LITERATURE DOCUMENTS					
Examiner Cite Initials No.1 Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, calado, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.		T <sup>2</sup>				
		Office Action issued in 10/610,560 on 02-07-2008.				
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Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language Translation is attached.

Examiner	Date	
Signature	Considered	l .